

Work Order ID 119602

Friday, May 16, 2014 1:45:02 PM

119602

Page 1

Item ID: D4121-3 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Hose Assy
 Start Date: 5/15/14 Start Qty: 6.00 ***6*** Cust Item ID:
 Required Date: 5/15/14 Req'd Qty: 6.00 ***6*** Customer:
 Reference:

Approvals: Process Plan: MLJ Date: 14-05-23 Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D4121	D

100 PURCHASING 0.00

100

Purchasing

Purchasing

PURCHASING

Memo

Create D2729-1 label and include with W/O

Issue P/O: 24357

Hose Assembly as per Dwg D4121

Possible Supplier: API

Material release note is required

0.00

CD 14/05/27 (6)

110 Receive & Inspect for Damage & Mat'l Certs 0.00

110

Packaging

Packaging

Memo

Ensure Material Release Note is attached

0.00

6x SP 14-5-29

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 119602

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119602

Page 2

Item ID: D4121-3 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Hose Assy
 Start Date: 5/15/14 Start Qty: 6.00 ***6*** Cust Item ID:
 Required Date: 5/15/14 Req'd Qty: 6.00 ***6*** Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 *120* QC Quality Control	QC6- Inspect dimensions to drawing Memo	0.00 0.00				<u>6</u>			
130 *130* Small Fab Small Fab	Small Fab Memo Install D2729-1 as per Dwg D4121 using D2182-045 Heat Shrink Batch: <u>26009</u>	0.00 0.00				<u>6</u>			FF 14-06-02
140 *140* QC Quality Control	QC5- Inspect part completeness to step on W/O Memo	0.00 0.00				<u>6</u>			

SHR
4/5/30

DAS
27
9-89
4/6/3

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Design											
Doc/Data											
Equip/Tooling											
Handling/Pre											
Material											
Operator											
Offset/Setup											
Process											
Supplier											
Training											
Transport											
Unapproved											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 119602

Friday, May 16, 2014 1:45:02 PM

119602

Page 3

Item ID: D4121-3 Accept *N9000040100* Setup Start *NS1*
Revision ID: Stop *NS2*
Item Name: Hose Assy
Start Date: 5/15/14 Start Qty: 6.00 *6* Cust Item ID:
Required Date: 5/15/14 Req'd Qty: 6.00 *6* Customer:
Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150	Identify as per dwg & Stock Location: <u>ST</u>	0.00							
150									
Packaging	Memo	0.00							
Packaging									
160	QC21- Final Inspection - Work Order Release	0.00							
160									
QC	Memo	0.00							
Quality Control									

6x DAS 28 9-89 JUN 04 2014
14/6/5
MF
14-6-4

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
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Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Picklist Print

Friday, May 16, 2014 1:45:07 PM

Page 1

Work Order ID: 119602

119602

Parent Item: D4121-3

D4121-3

Parent Item Name: Hose Assy

Start Date: 5/15/14

Required Date: 5/15/14

Start Qty: 6.00

Required Qty: 6.00

Comments: IPP REV:A NEW ISSUE 10-10-05 JLM VERIFIED BY:DD IPP
REV:B AS PER ECN 11-598 11-06-05 JLM VERF:DD IPP REV:C
11.11.16 AS PER DWG REV.D DD VERF:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
156003-6D0590		Purchased	No			110	Each	0.0000	1	6			
156003-6D0590									**				
Hose Assembly													
D2182-045		Manufactured	No			130	Each	0.0000	1	6			
D2182-045									**				
Heat Shrink 4.5" Long													

6x SP14-5-29

6 FF 14-06-02

26009

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

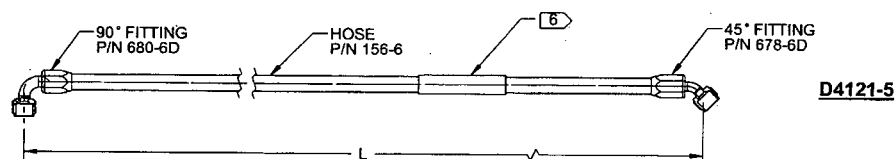
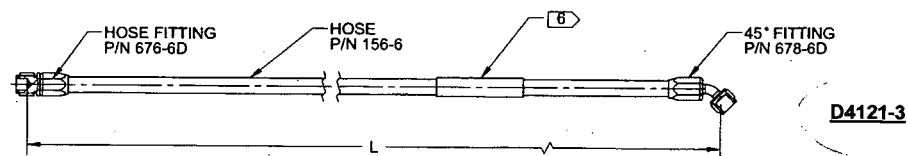
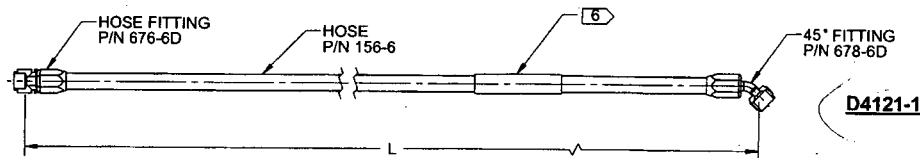
Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other _____ _____ _____
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8 7 6 5 4 3 2 1

HOSE SPECIFICATION			
DART P/N	STRATOFLEX P/N	VENDOR	L
D4121-1	156003-6D0274	API/ AVIAL	27.50
D4121-3	156003-6D0590	API/ AVIAL	59.00
D4121-5	156062D1054D000	API/ AVIAL	105.50



SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE

WORK ORDER
NO. 119602 MLJ
14-05-23

RELEASED
R 2011-11-16
MD

NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N & B/N USING D2729-1 LABEL INSTALLED WITH D2182-045 HEAT SHRINK
- 7) WEIGHT: N/A
- 8) STAINLESS STEEL COVERING TO HAVE MINIMUM THICKNESS OF 0.015"

D	P/N 156003-6D0590 WAS 156003-6D0570 (ZN D2-1)	RF	11.11.14
C	ADD P/N 156062D1054D000 TO D4121-5	RF	11.07.27
B	P/N 676-6D WAS P/N 678-6S (ZN C4-1, B4-1); P/N 678-6D WAS 676-6S (ZN DB-1, C8-1); P/N 680-6D WAS P/N 680-6S (ZN B8-1); UPDATE STRATOFLEX P/N (ZN C2-1); UPDATE NOTE 8	RF	11.03.07
A	NEW ISSUE	RF	10.08.16
REV.	DESCRIPTION	BY	DATE
DESIGN	RF	DART AEROSPACE USA, INC. KENT, WA	
DRAWN	RF		
CHECKED	<i>[Signature]</i>	DRAWING NO.	REV. D
MFG. APPR.	<i>[Signature]</i>	D4121	SHEET 1 OF 1
APPROVED	<i>[Signature]</i>	TITLE	SCALE
DE APPR.	<i>[Signature]</i>	HOSE ASSEMBLIES	NTS
DATE	11.11.14	<small>COPYRIGHT © 2010 BY DART AEROSPACE USA, INC. THIS DOCUMENT IS UNCLASSIFIED AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMERCIAL TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE USA, INC.</small>	

8 7 6 5 4 3 2 1



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID **PO24357**

Purchase Order Date 5/27/2014

PO Print Date 5/27/2014

Page Number 1 of 2

Order From :

AVIALL
PO BOX 842275

DALLAS, TX 75284-2275
USA

VU-AVI003

Ship To : DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

PAID

Contact Name

Vendor Phone 905-676-1695

Ship To Contact

Ship To Phone

Ship Via: FedEx PI collect

Ship Acct:

Buyer

Chantal Lavoie

Customer POID

Customer Tax # 10127-2607

Terms

Net 30

Currency

USD

FOB

FCA - (Free Carrier)

Line Nbr	Reference Vendor Part Number Line Comments Delivery Comments	Description/ Mfg ID	Req Date/ Taxable Promise Date	CD	Req Qty/ Unit of Measure	PO Unit Price	Extend Pri
1	156003-6D0590 AS PER DWG D4121 REV.D B119602	Hose Assembly	6/4/2014 No 6/4/2014		6.00 Each	\$207.32	\$1,243.1
						Line Total:	\$1,243.1
2	156003-6D0274 AS PER DWG D4121 REV. D B119641	Hose Assembly	6/4/2014 Yes 6/4/2014		6.00 Each	\$165.00	\$990.0
						Line Total:	\$990.0

SP14-5-29

PO Instructions:

Note:

5/27/2014



PACKING LIST



DELIVERY NUMBER: 8000457989

ROUTE: US FedEx International Priority

PAGE:1 of 1

DATE:05/28/2014

TIME:16:04:50

EMP:00000000

ORD TYP: ZOR 132

CURRENCY:USD

CUSTOMER PO:24357
ORDER NUMBER:1000335204
ORDER DATE:05/27/2014

B 10003951
I DART AEROSPACE LTD
L 1270 ABERDEEN STREET
L HAWKESBURY ON K6A 1K7
T CANADA
O

S 10003951
H DART AEROSPACE LTD
I 1270 ABERDEEN STREET
P HAWKESBURY ON K6A 1K7
T CANADA
O

S 1009
H AVIALL DALLAS HOSE SHOP
I DALLAS HOSE SHOP
P 2755 REGENT BLVD
FROM DFW AIRPORT TX 75261-9048
M USA

LINE	PO LINE	MFG	ITEM DESCRIPTION	ORDER QUANTITY	SHIP QUANTITY	QUANTITY BACK ORDER	UOM	LIST PRICE	CUSTOMER PRICE	EXTENDED CUSTOMER PRICE
000010	10	1S	156003-6D0590 HOSE: MED PRESSURE,RUBBER	6	6	0	EA		207.32	1,243.92
			BATCH 100015612		6					
000020	20	1S	156003-6D0274 HOSE: MED PRESSURE,RUBBER	6	6	0	EA		165.00	990.00
			BATCH 100015613		6					

SP14-5-29.

This is not an Invoice.
For payment processing, please refer to Invoice.

The recipient of these goods agrees to comply with all export regulations governing the transfer, sale, lease, or use of these goods.
Diversion contrary to U.S. Law is prohibited.

CERTIFICATE OF CONFORMANCE

It is hereby certified that Aviall Services, Inc., is an approved distributor and meets all requirements of ISO9001, AS9100, AS9120 and AC 00-56 at 2750 Regent Blvd. DFW Airport, Texas. The products, articles or parts referenced on this document are in new or overhauled condition and were purchased from an approved source (FAA, EASA, TCCA, Mil Spec or Commercial). The Original Manufacturers' Certifications are maintained on file at our central office location, and copies are available upon request or at Aviall.com. For overhauled or repaired products, articles or parts, the original FAA 8130-3 / EASA Form 1 (Return to Service) or Yellow Tag, from the FAA/JAA/EASA approved Air Agency are attached to the component.

DISCOUNT TERMS APPLY ONLY TO SUB TOTAL. ALL
RETURNED MERCHANDISE SUBJECT TO HANDLING
FEE.
THIS IS TO CERTIFY THAT AVIALL HAS COMPLIED WITH
THE PROVISIONS OF THE FAIR LABOR ACT OF 1938



A BOEING COMPANY

COMMERCIAL INVOICE

NOEEI FTR 30.36

AVIALL DALLAS HOSE SHOP
2755 REGENT BLVD
DFW AIRPORT, 75261-9048, USA

Page - 1 of 1

INCO TERMS: EXW - Shipping Point

CUSTOMER PO NO.: 24357
PROFORMA NO.: 9300518783
EXPORT DATE: 28-May-2014

DELIVERY NUMBER: 8000457989
ORDER NUMBER: 1000335204

CONSIGNEE: 10003951
DART AEROSPACE LTD
1270 ABERDEEN STREET
HAWKESBURY
K6A 1K7, Canada

BILL TO: 10003951
DART AEROSPACE LTD
1270 ABERDEEN STREET
HAWKESBURY
K6A 1K7, Canada

ULTIMATE CONSIGNEE: 10003951
DART AEROSPACE LTD
1270 ABERDEEN STREET
HAWKESBURY
K6A 1K7, Canada

FORWARD AGENT -- FEDEX

LINE	ITEM	QUANTITY	SELL UOM	BATCH NUMBER	DISCOUNT	NET AMOUNT
	DESCRIPTION	UNIT PRICE	CURRENCY	SERIAL NUMBER	USD	USD
1	156003-6D0590	6.000	EA	100015612	0.00	1,243.92
	HOSE: MED	207.32	USD			
	PRESSURE,RUBBER					
	Export Classification: 9A991.d Schedule B: 4009220050 Country of Origin: US					
	Export Authorization Number: NLRAT_MAY_2014					
2	156003-6D0274	6.000	EA	100015613	0.00	990.00
	HOSE: MED	165.00	USD			
	PRESSURE,RUBBER					
	Export Classification: 9A991.d Schedule B: 4009220050 Country of Origin: US					
	Export Authorization Number: NLRAT_MAY_2014					
	FOR CUSTOM PURPOSES ONLY					

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Signature

JR Hofmann, director Quality Assurance & Training

GROSS AMOUNT	2,233.92
INVOICE DISCOUNT	0.00
ADD ON CHARGES	0.00
TAX AMOUNT	0.00
FREIGHT CHARGE	0.00
NET AMOUNT	2,233.92
DOWN PAYMENT	0.00
NET AMOUNT DUE	2,233.92

These commodities, technology or software were exported from the United States in accordance with the Export Administration Regulations. Diversion contrary to US laws is prohibited

THIS IS TO CERTIFY THAT AVIALL HAS COMPLIED WITH THE PROVISIONS OF THE FAIR LABOR STANDARDS ACT OF 1938 AS



Hose Shop 2755 Regent Blvd. DFW Airport 75261

Phone 972-586-1380 Fax 972-586-1381 www.aviall.com

TSO CERTIFICATION

It is hereby certified that (A) The parts and/or materials reflected herein were produced under Federal Aviation Administration approved manufacturing and quality control system/methods as set forth in the FAA issued technical standard order authorizations (TSOA) issued to Stratoflex and (B) such part and/or materials are new and are in condition for safe operation.

Customer Order Number: 1000335204

1. 156003-6D0590 6EA.
2. 156003-6D0274 6EA.

Signed: _____

Date: 5-28-14

"Aviall is not providing OEM parts. Aviall is an authorized Stratoflex distributor providing TSO assemblies. Numbers referenced per customer requirements are for customer reference ONLY and are in no way intended to be represented as OEM parts. Any reference to an OEM part number does not authorize or reflect installation authority for this part. The installation authority is provided by the mechanic installing this product in accordance with FAR Part 43".

If applicable, satisfactory compliance with the conditions and tests required for TSO approval indicates the hose assembly has met the minimum performance standards as stated in the TSO. Furthermore, it is the responsibility of the installer to determine the installation eligibility and that it will not cause the hose assembly to be subjected to conditions in excess of those for which it has been approved.

FORM# CERT -001